# Excess Liability Trust Fund (ELTF) Scope of Work Instructions for Corrective Action Plans approved on or after January 1, 2018

This application is the form and format approved and required by the administrator to determine if the work to be performed or the work already performed under an approved Corrective Action Plan (CAP) is cost effective pursuant to IC 13-23-9-1.5(a)(1) and 328 IAC 1-3-1.3. IDEM may request this form for any ongoing corrective action work being conducted at ELTF sites. This form is required for any CAP or CAP Addendums approved by IDEM after January 1, 2018 where ELTF reimbursement will be requested. This application is also the form and format approved and required by the administrator to request preapproval pursuant to 328 IAC 1-3-1.6.

Open the ELTF Scope of Work – State Form 51955. Click on "Enable Editing" and then "Enable Content" to begin entering information.

## **Section 1 Eligible Party Information**

Eligible Party denotes the entity that has the right to reimbursement from ELTF pursuant to statute. Prior to July 1, 2016, the statutes and rules granted ELTF access to underground storage tank (UST) owners, UST operators, and transferees or subsequent owners of UST properties. On July 1, 2016, the term "eligible party" as defined by IC 13-11-2-62.5 (see below) was created by statute to define those entities who may access the fund. In most instances, the eligible party is going to be an entity subject to statutory requirements to clean up the contamination and should actively verify the work being completed is necessary and cost effective to meet the risk-based clean up criteria.

## IC 13-11-2-62.5"Eligible party"

Sec. 62.5. "Eligible party", as used in IC 13-23, means any of the following:

- (1) An owner, as defined in IC 13-11-2-150.
- (2) An operator, as defined in IC 13-11-2-148(d) and IC 13-11-2-148(e).
- (3) A former owner or operator of a UST.
- (4) A transferee of property upon which a UST is located.
- (5) A transferee of property upon which a UST was located but from which the UST has been removed.

*As added by P.L.96-2016, SEC.2.* 

Documentation Required to Show Status as Eligible Party, UST Owner/Operator, or Transferee/Subsequent Owner of Property: If requested by IDEM, an eligible party will be required to supply a copy of a notification form or other documentation to verify eligible party status, including effective timeframes.

## **Section 2 Consultant/Authorized Agent Information (Optional)**

This section may be filled out with consulting / authorized agent information. Essentially, once IDEM issues a final determination, the agreed upon costs in the Scope of Work will be set, even if the consultant / authorized agent changes during the corrective action work.

#### **Section 3 Site Information**

Enter correct identifying site information. The Leaking UST (LUST) incident number entered should match the LUST incident number utilized when reimbursement is sought from ELTF. The Further Site Investigation (FSI) and CAP submittal dates should be the most recent.

# Section 4 Signature of UST Owner, UST Operator, Property Owner and/or Attorney in Fact

Your signature on the Scope of Work form indicates that, upon the expiration of any right of review, you will be bound by the administrator's determination and this form will be the basis for a budget for this corrective action.

# Section 5 Remediation alternatives as required by 329 IAC 9-5-6 (d) (Order alternatives in the preference desired.)

The form allows up to five (5) different remediation alternatives to be listed as indicated by boxes numbered 1 through 5. At least one (1) remediation alternative must be included; therefore the first box is already checked and corresponding Sections 6-10 for that alternative appear immediately below Section 5 under the heading "Selection #1 – SOW (*itemized*)". Additionally, a tab entitled "SOW (itemized)" corresponding to Selection #1 appears in the Excel document. For each additional remediation alternative to be considered, check the next consecutive box to open up an additional set of Sections 6 – 10 for each alternative. These additional sets of Sections 6-10 will appear consecutively below under corresponding headings such as "Selection #2 – SOW (*itemized*)", etc. Additional tabs will also appear for each alternative entitled "SOW (itemized) (2)", "SOW (itemized) (3)", etc.

Check the appropriate box if requesting preapproval from ELTF.

#### **Sections 6-10 Remediation Alternative Selections**

Corresponding Sections 6-10 for each remediation alternative are broken down by phase and will contain your estimated costs for those portions. Fill out appropriate quantities and an associated cost for each item. The costs in Sections 6 - 10 should be overall estimated costs for the activity or phase listed.

Once the "SOW (itemized)" tab is filled out (see below), the costs in column "I" on that tab will autopopulate column "I" on the "SOW" tab for your comparison.

## **SOW** (itemized) Tabs

The "SOW (itemized)" tab requires you to further breakdown the costs that will be sought for reimbursement for the respective phases, the same way you would request reimbursement on the "ELTF Application (Phase Approach)", State Form #56424. All potential costs need to be included to make a valid cost effectiveness determination. This will set a budget for the corrective action.

For each alternative, the information from Sections 6-10 should be broken down into comprehensive descriptions of all hours and costs associated with the remediation alternative. The "SOW (itemized)" tab contains the current ELTF rates. Budgeting should be done using the current ELTF rates or a lower amount. The field will not allow you to request a higher amount.